16836 E. Palisades Blvd. P.O. Box 17958

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

### (Planca Print)

	(11	ease Timi)			
Position(s) Applied For				Date of App	blication
How Did You Learn About Us?  Advertisement Employment Agency		—— Walk-in —— Other ———			
Last Name	First Name		N	Aiddle Name	
Address Number Street		City		State	Zipcode
Telephone Number(s)		Soc	cial Security N	Tumber	
If you are under 18 years of a of your eligibility to work?	age, can you pr	ovide required proof		_ Yes	No
Have you ever filled an appl	ication with us	before?  If Yes, give of		_ Yes	No
Have you ever been employe	ed with us before	_		_ Yes	No
				_ Yes	No
May we contact your present employer?				_ Yes	No
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?  Proof of citizenship or immigration status will be required upon employment.				_ Yes	No
On what date would you be a	available for wo	ork?			
Are you available to work: .	Full Time	Part Time Sh	ift Work	Te	mporary
Are you currently on "lay-of	f" status and su	bject to recall?		_ Yes	No
Can you travel if a job requir	res it?			- Yes	No
Have you been convicted of a felony or have any pending criminal Yes Near the charges? Conviction will not necessarily disqualify an applicant from employment.					No
If yes, please explain					

## **Education**

		Name and Address of School	Course of Study	Years Con	npleted	Diploma Degree
Elementar School	ı <b>y</b>					
High Scho	ol					
Undergradu College	ate					
Graduate Profession						
Other (Spec	eify)					
						I.
	Optic	onal: Indicate any fore	eion languages vou car	n sneak, reac	d and / or	r write.
	Op	FLUENT				FAIR
~		FLUENT	GOOI	GOOD		FAIK
SPEAK	<u> </u>					
READ						
WRITE						
Describe any specialized training, apprenticeship, skills and extra-curricular activities that may be job related.						
Describe any job-related training received in the United States Military.						

## **Employment Experience**

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

Employer		Dates En	mployed	Work Performed
		From	To	work Performed
Address				
Telephone Number(s)		Hourly Ra	nte/Salary	
		Starting	Final	
Tob Title	Supervisor			
Reason for Leaving	1			
Employer		Dates E	mployed	Work Performed
		From	То	
Address				
Telephone Number(s)		Hourly Ra		
		Starting	Final	
ob Title	Supervisor			
Reason for Leaving				
Employer		Dates E	mployed	Work Performed
		From	To	work renormed
Address				
Telephone Number(s)		Hourly Ra	nte/Salary	
		Starting	Final	
ob Title	Supervisor			
Reason for Leaving				
Employer		Dates E	mployed	Work Performed
		From	То	work renormed
Address				
Telephone Number(s)		Hourly Ra	nte/Salary	
		Starting	Final	
ob Title	Supervisor			
Reason for Leaving				

List prof	essional, trade, business or civic activities and offices held.	
	xlude membership which would reveal gender, race, religion, national origin, age, ancest or other protected status:	try,

# **Additional Information** Other Qualifications

Summarize special j experience.	job-related skills and qual	lifications acquired fro	om employment or other
<b>Specialized Skills</b>	Check Skills/F	Equipment Operated	
		Production/Mobile	
PC	Microsoft Excel	Machinery (list):	Other (list):
Calculator	Microsoft Word		
Fax			
PBX System			<u> </u>
_			<u> </u>
State any additional in	nformation you feel may be	halpful to us in conside	ving vour application
State any auditional in	morniauon you icei may be	neipiui to us in conside	лид учи аррисации
References			
1		( )	
1.	(Name)	Phon	ue #
	(Address)	_	
2	(Addices)	( )	
	(Name)	Phon	ie #
	(Address)	( )	
3	(Name)	Phon	
	(Address)		

## **Applicant's Statement**

Applicant 8 Statement					
I certify that answers given herein are true a	nd complete to the best of my knowledge.				
I authorize investigation of all statements c may be necessary in arriving at an employm	ontained in this application for employment as ent decision.				
This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at this time.					
I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.					
In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.					
Signature of Applicant Date					
FOR HUMAN RESOURCE	ES DEPARTMENT USE ONLY				
Arrange InterviewYesNo Remarks					
	INTERVIEWER DATE				
EmployedYesNo					
Job Title Sala	ary Department				
ByNAME AND	TITLE DATE				
NOTES					